

Growing an optometry workforce for Aboriginal and Torres Strait Islander communities

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Background: Optometry services provided in Aboriginal Health Services are critical for improving eye care access for Aboriginal and Torres Strait Islander Australians by providing comprehensive eye examinations in a culturally safe primary health setting. Indigenous communities' eye care needs are high and most vision loss is avoidable yet one third of adults have never had an eye examination. Optometry provides access to refraction and affordable glasses (addressing 50% of vision loss) and detect, monitor and refer the other main causes of vision loss (cataract, diabetic retinopathy). Key to sustained improvements in eye care access and equitable outcomes is an appropriately skilled and competent optometry workforce.

Aim: This presentation describes the strategies of two non-government, non-profit eye care organisations to develop an acceptable, appropriately trained and sustainable workforce for outreach optometry services within Aboriginal communities in Victoria and the Northern Territory.

Methods: Both eye care organisations employ a significant number of optometrists with a public health emphasis, who may be directly employed or engaged as locums, and work in close partnership with government and Aboriginal community controlled health clinics. Proactive strategies have been developed to ensure service sustainability and continuity of care. In 2014, 133 weeks of optometry services were provided in the NT by 53 optometrists. Optometrists must comply with specific requirements in preparation for working in remote Aboriginal communities. Orientation resources and ongoing email support is also provided. The Victorian based organisation provides affordable eye care for people experiencing disadvantage and is a clinical site for optometry students. 45 staff and 30 casual optometrists provide clinical education and eye care in urban and rural Victoria, including 22 Aboriginal Health Services. In 2014, an additional 35 weeks of optometry services were provided in the NT program. This organisation provides a public health environment where optometrists gain experience in community eye care, specialist clinical skills and education. Mentoring, peer support and a requirement for cultural awareness training facilitate the development of optometrists able to provide optimum eye care in challenging environments.

Conclusion and recommendations: Optometrists working with Aboriginal and Torres Strait Islander clients require specific training and support to ensure good patient outcomes and sustained and effective service delivery. Two leading public health optometry organisations are working to develop and utilise a specialised optometry workforce in Victoria and NT. This experience and ongoing evolution to improve optometry workforce and service delivery may be applicable to other health practitioner groups.